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PLAINTIFFS CONT FROM PAGE 1

TODD IRVIN, CODY PAULSEN, SUMMIT FOOD SERVICE,
 JOHN TRIERWELER, JESSICA WALDNER, TROY PANTO,
 GABSON (OR HASSON), GRAY, JULIE COX, KAYLA TMELEN,
 CHERA REVOLORIO, AARON HAYNES, SETH HUGHES,
 JEANNE BERTSCH, MARK RICHNER, SHELBY BLACK,
 (WESLEY) LIEUTENANT GRASSIE, JACK WILNER, RYAN VANDERAA,
 PENNY LINDSAY, JOHN AND/OR JANE DOE(S), TABITHA
 BENTING, RYAN LAMON, JENNIFER JACKSON, CASSANDRA BRETCH,
 LIZ MILLER, TAYLOR YOST, AMBER PIRAGOLIN, DARIN YOUNG,
 JENNIFER BREISKE, TROY PANTO, JESSICA COOK,
 BRENT FLUKE, MIKELENDHOLT, REBECCA SCHNEFFER

- MICHAEL**
3. Name of first Defendant: JOE HANVEY. The first Defendant is employed as:
PHYSICIAN ASSISTANT at SDSP - JAMESON.
 (Position and Title) (Institution)
 This Defendant is sued in his/her: ☒ individual capacity ☒ official capacity (check one or both)
 Explain how this Defendant was acting under color of law: CONTRACT PHYSICIAN
FOR STATE OF SOUTH DAKOTA
4. Name of second Defendant: KELLIE WASKO. The second Defendant is employed as:
SECRETARY OF CORRECTIONS at SOUTH DAKOTA STATE.
 (Position and Title) (Institution)
 This Defendant is sued in his/her: ☒ individual capacity ☒ official capacity (check one or both)
 Explain how this Defendant was acting under color of law: EMPLOYEE OF STATE
OF SOUTH DAKOTA
5. Name of third Defendant: ALYSSA WELBIG. The third Defendant is employed as:
NURSE PRACTITIONER at SDSP - JAMESON.
 (Position and Title) (Institution)
 This Defendant is sued in his/her: ☒ individual capacity ☒ official capacity (check one or both)
 Explain how this Defendant was acting under color of law: CONTRACT NURSE
FOR STATE OF SOUTH DAKOTA
6. Name of fourth Defendant: DAN SULLIVAN. The fourth Defendant is employed as:
FORMER WARDEN at SDSP - JAMESON.
 (Position and Title) (Institution)
 This Defendant is sued in his/her: ☒ individual capacity ☒ official capacity (check one or both)
 Explain how this Defendant was acting under color of law: EMPLOYEE OF STATE
OF SOUTH DAKOTA

(If you name more than four Defendants, answer the questions listed above for each additional Defendant on a separate page.)

B. PREVIOUS LAWSUITS

1. Have you filed any other lawsuits while you were a prisoner? ☒ Yes ☐ No
2. If your answer is "yes," how many lawsuits have you filed? 2. Describe the previous lawsuits in the spaces provided below:
3. First prior lawsuit:
 a. Parties to previous lawsuit:
 Plaintiff: MARK CHRISTMANS

A. JURISDICTION CONT

7. ARAMARK CORRECTIONAL SERVICES, LLC - CONTRACT FOOD SERVICE PROVIDER AT SDSP-JAMESON
SUED IN INDIVIDUAL AND OFFICIAL CAPACITY
CONTRACT FOOD PROVIDER FOR SOUTH DAKOTA PENITENTIARY
8. STEVEN SWYGERT - SGT. FOR SDSP/JAMESON
SUED IN INDIVIDUAL AND OFFICIAL CAPACITY
EMPLOYEE OF STATE OF SOUTH DAKOTA
9. RYAN HOWE - UNIT COORDINATOR AT JAMESON
SUED IN INDIVIDUAL AND OFFICIAL CAPACITY
EMPLOYEE OF STATE OF SOUTH DAKOTA
10. TIM SCHNEIDER, UNIT MANAGE AT JAMESON
SUED IN INDIVIDUAL AND OFFICIAL CAPACITY
EMPLOYEE OF STATE OF SOUTH DAKOTA
11. MELISSA MATURAN, ADMINISTRATIVE PENALTY COORDINATOR
AT JAMESON, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY
EMPLOYEE OF STATE OF SOUTH DAKOTA
12. TERESA BITTINGER, WARDEN AT SDSP/JAMESON
SUED IN INDIVIDUAL AND OFFICIAL CAPACITY.
EMPLOYEE OF STATE OF SOUTH DAKOTA

13. ANTHONY GRAHAM, ARAMARK SUPERVISOR AT JAMESON
SUED IN INDIVIDUAL AND OFFICIAL CAPACITY,
CONTRACT EMPLOYEE FOR FOOD SERVICE FOR SOUTH DAKOTA
14. MARK (LAST NAME UNKNOWN), ARAMARK SUPERVISOR AT
JAMESON, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY,
CONTRACT EMPLOYEE FOR FOOD SERVICE FOR SOUTH DAKOTA
15. YIEN (LAST NAME UNKNOWN), ARAMARK SUPERVISOR AT
JAMESON, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY,
CONTRACT EMPLOYEE FOR FOOD SERVICE FOR SOUTH DAKOTA
16. KAYLA TONLIN
~~XXXXXXXXXXXXXXXXXXXX~~, ARAMARK DIETITIAN FOR JAMESON,
SUED IN INDIVIDUAL AND OFFICIAL CAPACITY,
CONTRACT EMPLOYEE FOR FOOD SERVICE FOR SOUTH DAKOTA
17. C. IRIZARRY, ARAMARK DIETITIAN, SUED IN INDIVIDUAL
AND OFFICIAL CAPACITY, CONTRACT EMPLOYEE FOR FOOD
SERVICE FOR SOUTH DAKOTA
18. RAINY (LAST NAME UNKNOWN), ARAMARK SUPERVISOR AT
JAMESON, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY,
CONTRACT EMPLOYEE FOR FOOD SERVICE FOR SOUTH DAKOTA
19. TODD IRVIN, CORRECTION OFFICER, SUED IN
INDIVIDUAL AND OFFICIAL CAPACITY, EMPLOYEE
OF STATE OF SOUTH DAKOTA

20. CODY PAULSON, CORRECTIONAL OFFICER, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, EMPLOYEE OF THE STATE OF SOUTH DAKOTA
21. SUMMIT FOOD SERVICE, FOOD SERVICE PROVIDER AT JAMESON, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, CONTRACT FOOD SERVICE FOR SOUTH DAKOTA
22. JOHN TRIERWEILER, SUMMIT DISTRICT MANAGER, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, CONTRACT EMPLOYEE FOR STATE OF SOUTH DAKOTA
23. JESSICA WALDNER, SUMMIT DIETITIAN, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, CONTRACT EMPLOYEE FOR STATE OF SOUTH DAKOTA
24. TROY PONTO, ASSOCIATE WARDEN, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, EMPLOYEE FOR STATE OF SOUTH DAKOTA
25. GASSON, ARAMARK SUPERVISOR, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, CONTRACT EMPLOYEE FOR STATE OF SOUTH DAKOTA
26. GRAY, ARAMARK SUPERVISOR, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, CONTRACT EMPLOYEE FOR STATE OF SOUTH DAKOTA

27. JULIE COX, NURSE PRACTITIONER FOR SDDOC, SUES IN INDIVIDUAL AND OFFICIAL CAPACITY, CONTRACT EMPLOYEE FOR HEALTH SERVICES MENTAL HEALTH OR DOH EMPLOYEE
28. KAYLA THELEN, MENTAL HEALTH SUPERVISOR, SUES IN INDIVIDUAL AND OFFICIAL CAPACITY, CONTRACT EMPLOYEE FOR MENTAL HEALTH SERVICES OR EMPLOYEE OF DOC.
29. CIERRA REVOLORIO, HEALTH SERVICES SUPERVISOR, SUES IN INDIVIDUAL AND OFFICIAL CAPACITY, CONTRACT EMPLOYEE FOR HEALTH SERVICES OR NURSE FOR DOH
30. AARON HAYNES, CHIEF MEDICAL OFFICER FOR DOH, SUES IN INDIVIDUAL AND OFFICIAL CAPACITY, DOCTOR FOR DOH
31. SETH HUGHES, CAPTAIN-JAMESON ANNEX, SUES IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC EMPLOYEE
32. JEANNIE BERTSCH, MAJOR-JAMESON ANNEX, SUES IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC EMPLOYEE
33. MARK RICHYER, DOCTOR-JAMESON ANNEX, SUES IN INDIVIDUAL AND OFFICIAL CAPACITY, DOCTOR FOR DOH
34. SHELBY BLACK, NURSE PRACTITIONER FOR SDDOC, SUES IN INDIVIDUAL AND OFFICIAL CAPACITY, N.P. FOR DOH
35. LIETENANT GRASSIE, JAMESON ANNEX, SUES IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC EMPLOYEE
LT. WESLEY GRASSIE

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36. JACK WALTER, UNIT COORDINATOR JAMESON, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC EMPLOYEE
37. RYAN VANDERHART, UNIT MANAGER JAMESON, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC EMPLOYEE
38. PENNY LINDSAY, C.O. JAMESON, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC EMPLOYEE
39. JOHN AND/OR JANE DOES), EXECUTIVES FOR SUMMIT FOODS, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY SUMMIT EMPLOYEES (STATE CONTRACTOR)
40. INBITHA BENTING, ASSOCIATE WARDEN JAMESON, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC EMPLOYEE
41. RYAN LANDON, HEALTH SERVICES SUPERVISOR, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC/DOH EMPLOYEE
42. JENNIFER JACKSON, DIETICIAN FOR SODOC, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC/DOH EMPLOYEE OR CONTRACTED
43. KRETCM
CASSANDRA, MENTAL HEALTH PROFESSIONAL, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC/DOH EMPLOYEE
44. MILLER
LIZ, MENTAL HEALTH PROFESSIONAL, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC/DOH EMPLOYEE
45. TAYLOR YOST, UNIT COORDINATOR, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC EMPLOYEE
46. AMBER PIRAGLIA, DIRECTOR OF PRISONS, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, DOC EMPLOYEE

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47. DARIN YOUNG, FORMER CHIEF WARDEN, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, FORMER DOC EMPLOYEE
48. JENNIFER DREISKE, FORMER ASSOCIATE WARDEN, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, FORMER DOC EMPLOYEE
49. TROY PONTO, FORMER DEPUTY WARDEN, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, FORMER DOC EMPLOYEE
50. JESSICA COOK, FORMER ASSOCIATE WARDEN, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, FORMER DOC EMPLOYEE
51. BRENT FLIKE, FORMER MDSP WARDEN, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, CURRENT DEPUTY SECRETARY OF CORRECTIONS
52. MIKE UEDHOLT, FORMER SECRETARY OF CORRECTIONS, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, FORMER DOC EMPLOYEE
53. REBECCA SCHUEFFER, ASSOCIATE WARDEN MDSP, SUED IN INDIVIDUAL AND OFFICIAL CAPACITY, ~~DOC~~ EMPLOYEE

Defendants: DARRIN YOUNG, ET AL.

- b. Court: (If federal court, identify the district; if state court, identify the county.) DISTRICT OF SOUTH DAKOTA SOUTHERN DIVISION
- c. Case or docket number: 4:20-CV-04083-LLP
- d. Claims raised: ETH AND 1ST AMENDMENT
- e. Disposition: (For example: Was the case dismissed? Was it appealed? Is it still pending?)
- f. Approximate date lawsuit was filed: MARCH, 2020
- g. Approximate date of disposition: PENDING

4. Second prior lawsuit:

- a. Parties to previous lawsuit:
Plaintiff: MARK CHRISTIANS
Defendants: NANCY CHRISTENSEN, ET AL.
- b. Court: (If federal court, identify the district; if state court, identify the county.) DISTRICT OF SOUTH DAKOTA SOUTHERN DIVISION
- c. Case or docket number: 4:22-CV-04072-LLP
- d. Claims raised: 1ST, 8TH, 14TH AMENDMENTS
- e. Disposition: (For example: Was the case dismissed? Was it appealed? Is it still pending?)
- f. Approximate date lawsuit was filed: MAY, 2022
- g. Approximate date of disposition: PENDING

5. Third prior lawsuit:

- a. Parties to previous lawsuit:
Plaintiff: _____
Defendants: _____
- b. Court: (If federal court, identify the district; if state court, identify the county.) _____
- c. Case or docket number: _____
- d. Claims raised: _____
- e. Disposition: (For example: Was the case dismissed? Was it appealed? Is it still pending?)
- f. Approximate date lawsuit was filed: _____
- g. Approximate date of disposition: _____

(If you filed more than three lawsuits, answer the questions listed above for each additional lawsuit on a separate page.)

C. CAUSE OF ACTION

COUNT I

1. The following constitutional or other federal right has been violated by the Defendant(s): _____

STATE LAW NEGLIGENCE/MALPRACTICE
8TH AMENDMENT AND NEGLIGENT INFLECTION OF
EMOTIONAL DISTRESS

2. Count I involves: (Check only one: if your claim involves more than one issue, each issued should be stated in a different count)
- | | | | |
|--|--|---|-----------------------------------|
| <input type="checkbox"/> Disciplinary proceedings | <input checked="" type="checkbox"/> Medical care | <input type="checkbox"/> Access to the court | <input type="checkbox"/> Mail |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Retaliation | <input type="checkbox"/> Exercise of religion | <input type="checkbox"/> Property |
| <input type="checkbox"/> Threat to safety | <input type="checkbox"/> Other: _____ | | |

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count I. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

I WAS PRESCRIBED EXTRA PROTEIN IN MY DIET, BY A
SPECIALIST. I WAS ON AN EXTRA PROTEIN DIET FOR
ABOUT FOUR YEARS AND WAS DOING WELL. STEVEN
SWYGERT FALSELY TOLD MEDICAL STAFF I WAS
GIVING AWAY MY EXTRA PROTEIN SNACK. NP ALYSSA
WELBIG CANCELLED MY EXTRA PROTEIN W/O EXAMINING
ME OR TALKING TO ME AND W/O REFERRING TO
MY SPECIALIST. SHE DID SO STRICTLY DUE TO THE
FALSE ALLEGATION OF GIVING THE PROTEIN AWAY.
JOE MANUEY DENIED MY ADDITIONAL PROTEIN, EVEN
THOUGH I WAS PRESCRIBED BY A SPECIALIST AND
I WAS DOING WELL ON IT. ALYSSA WELBIG ALSO
DENIED REINSTATING MY PROTEIN SNACK EVEN
THOUGH SHE CANCELLED IT UNDER FALSE PRETEXTS.
TIM SCHNEIDER, DAN SULLIVAN AND MELISSA MATURIN ALL
DENIED MY GRIEVANCES EVEN AFTER KNOWING WHAT HAPPENED.
I WAS TOLD TO PURCHASE MORE COMMISSARY.

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

MY MUSCLES HAVE ATROPHIED AND I HAVE LOST
ABOUT 50 POUNDS SINCE THE CANCELLATION OF MY
SNACK. THIS IS MOSTLY MUSCLE AND SIGNIFICANT
STRENGTH LOSS. THIS WAS FROM OCT 2022 TO PRESENT.

5. **Administrative Remedies:**

MENTAL DISTRESS.

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
- b. Did you submit a request for administrative relief on Count I? ☒ Yes ☐ No
- c. Did you appeal your request for relief on Count I to the highest level? ☒ Yes ☐ No
- d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. _____

COUNT II

1. The following constitutional or other federal right has been violated by the Defendant(s):

8TH AMENDMENT MONELL CLAIM MALPRACTICE
STATE LAW NEGLIGENCE AND NEGLIGENT INFLECTION
OF EMOTIONAL DISTRESS CONSPIRACY

2. Count II involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)

☐ Medical care ☐ Access to the court ☐ Mail
☐ Disciplinary proceedings ☐ Retaliation ☐ Exercise of religion ☐ Property
☐ Excessive force by an officer ☐ Threat to safety ☒ Other: INADEQUATE NUTRITION.

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count II. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

WE ARE RECEIVING INADEQUATE NUTRITION FROM ARAMARK/DOC.
I HAVE LOST OVER 50 POUNDS, MOST OF WHICH WAS
MUSCLE. I HAVE INFORMED ARAMARK OF THIS THROUGH
MULTIPLE LETTERS, INCLUDING CERTIFIED MAIL. THE
WEIGHT WAS LOST OVER JUST A FEW MONTHS, INCLUDING
A 20 POUND WEIGHT LOSS OVER A ONE MONTH PERIOD.
THROUGH HAND DELIVERED LINES TO THE ARAMARK
SUPERVISORS THEY WERE ALSO INFORMED OF MY
WEIGHTLESS AND MEDICAL ISSUES RELATED DIRECTLY TO
THE INADEQUATE NUTRITION THEY PROVIDE. THE LINES
AND LETTERS INCLUDED MY GRIEVANCES, DIETARY GUIDELINES
AND OTHER NUTRITIONAL INFORMATION. NOT A SINGLE
REPLY HAS BEEN GIVEN AND MY DIET HAS NOT BEEN
ADJUSTED. WE ARE RECEIVING ONLY ABOUT 1500 CALORIES
A DAY OF NUTRITIONAL FOODS AND SHOULD BE GETTING
NEARLY DOUBLE THAT AT THE LEAST. DOC DEFENDANTS
WERE NOTIFIED BY GRIEVANCES.

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

WEIGHT LOSS OF 50 POUNDS IN JUST A FEW MONTHS. MUSCLE
ATROPHY, STRENGTH LOSS, HUNGER PAINS, WEAKNESS, FATIGUE,
MENTAL ANGUISH. THE WEIGHT LOSS WAS BETWEEN
JANUARY 2023 AND APRIL 2023. HIGH CHOLESTEROL, DYSLIPIDEMIA

5. **Administrative Remedies:** RESULTING IN HIGH RISK CARDIAC ISSUES AND

a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No SEVERE
b. Did you submit a request for administrative relief on Count II? ☒ Yes ☐ No CHEST
c. Did you appeal your request for relief on Count II to the highest level? ☒ Yes ☐ No PAIN,
d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. HYPERLIPIDEMIA.

INJURY CONT: LOST AN ADDITIONAL 12 POUNDS (MUSCLE
ATROPHY) IN ABOUT TWO WEEKS.

COUNT II CONT

MY CHOLESTEROL HAS BEEN ABOVE NORMAL LEVELS AND THE CHOLESTEROL MEDICATION I WAS TAKING WAS CHANGED TO LOVASTATIN AND NOW DOUBLED IN DOSE. DR. MARK RICHTER SAID IT IS DUE TO MY DIET AND PRESCRIBED ME A CARDIAC DIET WITH LOW FAT AND LOW CHOLESTEROL WITH MORE WHOLE LEAN MEATS INCLUDING CHICKEN BREAST AND FISH WITH MORE FRUIT AND VEGETABLES. THIS IS WHAT HE INSTRUCTED ME AND I MADE DOC ADMINISTRATION AWARE INCLUDING TIM SCHNEIDER, THERESA BITTINGER, KELLI WASKO, MELISSA MATURIN BUT NONE HAVE ACTED ON THE MATTER AS I'M STILL NOT RECEIVING THE DIET THE DOCTOR TOLD ME. I ALSO INFORMED THE ARAMARK DEFENDANTS BUT THEY REFUSE TO COMPLY SERVING ME A MAIN LINE DIET WITH HIGH FAT MEAT, DEED FAT FRIED FOODS, CHEESES AND SWEETS THREE TIMES A DAY. OTHER FOODS SERVED ARE FRIED IN BUTTER. ALL OF WHICH DR. RICHTER TOLD ME I SHOULD NOT BE CONSUMING. MY PREVIOUS VISIT WITH DR. RICHTER WAS SEPTEMBER 21, 2023 AND MY DIET HAS NOT BEEN CORRECTED. THE DOCTOR SAID HE'S WORRIED ABOUT PLAQUE BUILDUP AND CARDIO VASCULAR DISEASES IF I CAN'T GET MY CHOLESTEROL DOWN IN NORMAL RANGE.

COUNT 11 CONT

WHILE THE FOREGOING STILL APPLIES ON MARCH 16, 2024
 ANOTHER DIET ORDER WAS ISSUED FOR MORE FRUIT, VEGETABLES,
 WHOLE GRAINS AND LEAN MEATS. THIS SO FAR HAS ONLY SEEN
 AN INCREASE IN FRUIT SERVED. THE REST OF THE DIET ORDER
 IS NOT FOLLOWED AT ALL OR NOT FOLLOWED AS ORDERED,
 SINCE THE DIET HAS BEEN EXPIRED. DR. RICHTER SAID HE
 WANT FOR IT TO BE AT LEAST A YEAR OUT BUT "MUST
 HAVE ENTERED THE WRONG YEAR" (2024 NOT 2025) AND IT
 EXPIRED AFTER TWO WEEKS TO SIX WEEKS. HE SAID
 HE WOULD RE-ENTER BUT FAILED TO DO SO.
 THEN IN JUNE 2024, N.P. SHELBY BLACK SAID SHE WOULD
 BE SURE DR. RICHTER'S ORDERS WOULD BE "COPIED AND
 PASTED" TO RE-ENTER, HOWEVER SHE DID NOT DO SO
 AND ORDERED A "CARDIAC DIET" CONTAINING 2000 CALORIES
 PER DAY (ALLEGEDLY). THIS IS THE SAME AS PRIOR YEARS
 OF WHICH ARMARK DOES NOT PROVIDE. I INFORMED
 BLACK OF THIS AND CIERA REVOLARIO OF THIS AT A
 FOLLOW UP APPOINTMENT THE NEXT WEEK, TOLD THEM OF
 WABCO'S REPLY AND ARMARK WOULD NOT HONOR IT. THEY
 SUPPLIED ME WITH A "MENU" OF A CARDIAC DIET BUT
 AGAIN ARMARK REFUSED TO PROVIDE IT. BLACK AND
 REVOLARIO REFUSED TO HONOR DR. RICHTER'S PREVIOUS
 ORDER OF A SPECIFIC PROVIDER DIET AND SAID THE
 CARDIAC DIET WAS OK. KNOWING THAT IT WAS NOT
 PROVIDED. I ADDITIONALLY POINTED OUT MY LOSS OF
 MUSCLE, PREVIOUS SPECIALISTS AND DOCTOR'S ORDERS
 OF EXTRA PROTEIN AND THE "CARDIAC DIET" ~~WAS~~ IN
 THE MENU THEY PROVIDED DID NOT MEET DOCTOR
 RICHTER'S ORDERS (IT LACKED SIGNIFICANT VEGETABLES,
 WHOLE GRAINS, LEAN MEATS AND EXTRA PROTEIN AT
 MINIMUM). THEY INSISTED NOTHING MORE COULD BE
 DONE ALTHOUGH POLICY STATED THEY HAD VARIOUS
 OPTIONS TO TREAT MY CARDIAC DISEASE AND PREVENT
 MORE DAMAGE. TO POINT OUT THE TOP DIETICIANS, FOOD

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COUNT II - CON'T

SCIENTISTS AND MEDICAL DOCTORS IN THE NATION AND WEEKS DISAGREE WITH BLARK'S ASSESSMENT AND ORDERS, SINCE BLARK'S ORDERS I'VE LOST AN ADDITIONAL 12 POUNDS, AGAIN, PRIMARILY MUSCLE (HER 2000 CALORIE DIET WAS PROVIDED "SOMEWHAT" FOR ROUGHLY 6-7 DAYS WHERE I LOST 7 POUNDS) (AN ADDITIONAL 5 POUNDS WAS LOST AFTER AGAIN BEING INFORMED ARAMARK DOES NOT PROVIDE THE DIET BLARK ORDERED) SO TO CLARIFY, I WAS ON A MAIN LINE (REGULAR) DIET AND LOST 5 POUNDS HOWEVER, THIS WAS IN THE SHU WHERE COMMISSARY IS NOT ALLOWED AND I WAS SOLELY DEPENDANT ON ARAMARK'S FOOD PROVIDED. THE DATES OF WEIGHT LOSS WAS 7 POUNDS FROM JUNE 3 TO JUNE 10 AND 5 POUNDS FROM JUNE 13 TO JUNE 18 (SHU).

ARAMARK HAS A CUSTOM OF PROVIDING INADEQUATE FOOD AND SMALLER THAN MENU PORTIONS ON A DAILY BASIS TO SAVE MONEY AT THE EXPENSE OF INMATE HEALTH.

JENNIFER JACKSON REFUSED TO GIVE ADDITIONAL FRUITS, VEGETABLES, WHOLE GRAINS AND LEAN PROTEIN - OR ADDITIONAL PROTEIN TO TREAT MY DYSCHOLEMIA / HYPERLIPIDEMIA EVEN THOUGH IT WAS DOCTOR ORDERED SPECIFICALLY FOR SPECIFIC SERVING AMOUNTS. NOR DID SHE ADDRESS MY MUSCLE WASTING/ATROPHY. HER REFUSALS GO AGAINST DECADES WORTH OF SCIENTIFIC EVIDENCE, TOP DIETICIANS, DOCTORS AND FOOD SCIENTISTS AND THE SODOC'S OWN POLICY (DOH). BLARK'S REFUSALS ALSO WAS IN OPPOSITE DOC/DOH POLICY. AMBER PIRAGLIA REFUSED TO CORRECT MY DIET AND WITH WASKO, BITINGER, ARAMARK AND ITS EMPLOYEES CONSPIRED TO PROVIDE INADEQUATE NUTRITION TO REDUCE BUDGET COSTS AND MAKE PROFIT AT THE EXPENSE OF INMATE HEALTH AND VIOLATING OUR RIGHTS TO RECEIVE ADEQUATE NUTRITION. THE CONSPIRACY CLAIM SHOULD ALSO INCLUDE JACKSON BY HER ACTIONS.

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JACKSON, LIKE THE OTHER DOC DEFENDANTS KNOW ABOUT THE INADEQUATE NUTRITION, YET LIKE ARAMACK TRY TO CONVINCE OTHERS THE FOOD IS ADEQUATE EVEN WHEN HARD FACTUAL EVIDENCE DISPUTES THEIR CLAIMS. IN ESSENCE THEY MADE A PLAN TO TELL US (INMATES) WE ARE BEING PROVIDED 2700 CALORIES DAILY WHILE KNOWINGLY AND PURPOSELY PROVIDING AROUND 1500 CALORIES DAILY OF NUTRITIOUS FOOD (AND I USE THE TERM "NUTRITIOUS" LOOSELY). IT'S LIKE TELLING A REASONABLE PERSON (POSSIBLE TURK) THE SKY IS GREEN AND THE GRASS IS BLUE IN AN EFFORT TO DECEIVE.

TO THE MALPRACTICE CLAIM AGAINST BLACK, SHE KNOWINGLY ORDERED A DIET OF 2000 CAL/DAY EVEN THOUGH MY DIETARY NEEDS ARE ROUGHLY TWICE THAT WHICH CAUSED UNSAFE WEIGHT LOSS (MUSCLE ATROPHY) AT A RATE 7 TIMES RECOMMENDED TO BE CONSIDERED SAFE. ADDITIONALLY SHE DID NOT PROVIDE A DIET TO CORRECT MY CARDIAC DISEASE KNOWING I HAD IT AND KNOWING THE DIET SHE ORDERED WAS NOT BEING MONITORED AND SHE HAD THE ABILITY TO DO SO. THAT ALL APPLIES TO REVOLVERIO AS WELL AND TO NEGLIGENCE CLAIMS AND CONSTITUTIONAL VIOLATIONS. DR. RICHTER SHOULD ALSO BE INCLUDED DUE TO HIS ACTIONS AND INACTIONS.

COUNT III

1. The following constitutional or other federal right has been violated by the Defendant(s): _____

8TH AMENDMENT

MEDICAL MALPRACTICE/ NEGLIGENCE - STATE LAW NEGLIGENCE,
NEGLIGENT INFLICTION OF EMOTIONAL DISTRESS

2. Count III involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)
- | | | |
|--|--|---|
| <input type="checkbox"/> Medical care | <input type="checkbox"/> Access to the court | <input type="checkbox"/> Mail |
| <input type="checkbox"/> Disciplinary proceedings | <input type="checkbox"/> Realization | <input type="checkbox"/> Exercise of religion |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Threat to safety | <input type="checkbox"/> Property |
| <input type="checkbox"/> Other: _____ | | |

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count III. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

I WAS TO LISTEN TO MUSIC FOR MY PSYCHIATRIC
CARE FOR ODD DIAGNOSES. I AM PROVIDED MEDICATION
BUT LISTENING TO MUSIC HELPS THE MOST. THE MEDICAL
STAFF AND THE DOC ARE REFUSING TO PROVIDE DAMAGES
FOR ME TO LISTEN TO MUSIC ON MY RADIO.
THIS INCLUDES DAN SULLIVAN, TERESA BITTINGER,
AND TIM SCHNEIDER, KAYLA HELEN, CASSANDRA, WASKO.
CHEWING GUM ALSO AIDES IN MY ODD CONDITION BUT
THE DOC WILL NOT LET ME DO THIS. I WAS TOLD
TO CHEW GUM BY THE THERAPIST. I WAS TOLD
TO LISTEN TO MUSIC BY THE THERAPIST/
PSYCHIATRIST. THIS WAS NOTIFIED TO KAYLA HELEN,
CASSANDRA, SCHNEIDER, BITTINGER AND WASKO.
PLEASE NOTE THE ABOVE MEDICATION THAT WAS
PROVIDED WAS SINCE REDUCED TO INEFFECTIVE LEVELS
DUE TO DOC POLICY NOT PROVIDING SUFF MEDS/AND/OR
CANCELLED.

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

MENTAL ANGUISH

5. **Administrative Remedies:**

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
- b. Did you submit a request for administrative relief on Count III? ☒ Yes ☐ No
- c. Did you appeal your request for relief on Count III to the highest level? ☒ Yes ☐ No
- d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. _____

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

COUNT IV

1. The following constitutional or other federal right has been violated by the Defendant(s): STATE LAW NEGLIGENCE

2. Count IV involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)

<input type="checkbox"/> Medical care	<input type="checkbox"/> Access to the court	<input type="checkbox"/> Mail
<input type="checkbox"/> Disciplinary proceedings	<input type="checkbox"/> Reconciliation	<input type="checkbox"/> Exercise of religion
<input type="checkbox"/> Excessive force by an officer	<input type="checkbox"/> Threat to safety	<input checked="" type="checkbox"/> Other: <u>OFFICER NEGLIGENCE RESULTING IN INJURY</u>

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count IV. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

DEC 03, 2020 I WAS IN FULL CHAINS, BELLY CHAINS, HANDCUFFED BOXED, AND LEG IRONS. AS I WAS EXITING THE 'TRANSPORT' VAN ON RETURN TO PRISON I WAS DROPPED OR POSSIBLY TRIPPED BY CO'S IRVIN AND PAULSON AND DROPPED TO THE GROUND LANDING ON MY LEFT KNEE. I VISITED HEALTH SERVICES ABOUT THIS AND LATER HAD AN MRI. IT WAS DETERMINED THAT I DESTROYED MY ACL, AS IT IS NO LONGER THERE. CO IRVIN WAS IN THE VAN BEHIND ME AND DID NOT HAVE MY RESTRAINTS SECURED. PAULSON WAS IN FRONT AND MADE NO EFFORT TO STOP MY FALL. PROCEDURE IS FOR CORRECTIONS OFFICERS TO HAVE RESTRAINTS SECURED BY GRIPPING THEM TO PREVENT FALLS. IRVIN AND PAULSON WERE NOT FOLLOWING PROCEDURE RESULTING IN MY INJURY.

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).
MY KNEE IS COMPLETELY MESSED UP. I CAN NO LONGER RUN, JOG OR DO CERTAIN EXERCISES INVOLVING MY LEG. IT'S IN PAIN (MY LEG), TORN ACL.

5. **Administrative Remedies:**

- Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
- Did you submit a request for administrative relief on Count IV? ☒ Yes ☐ No
- Did you appeal your request for relief on Count IV to the highest level? ☒ Yes ☐ No
- If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. I WAS ORIGINALLY DENIED A GRIEVANCE BY DAREK EBEREN DUE TO THIS "NOT A GRIEVABLE OFFENSE"

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

COUNT ~~III~~ V

1. The following constitutional or other federal right has been violated by the Defendant(s): _____

8TH AMENDMENT

4TH AMENDMENT

INTENTIONAL INFLECTION OF EMOTIONAL DISTRESS

✓ FAILURE TO TRAIN OR TERMINATE BY WASKO

2. Count ~~III~~ involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)
- | | | |
|--|--|--|
| <input type="checkbox"/> Medical care | <input type="checkbox"/> Access to the court | <input type="checkbox"/> Mail |
| <input type="checkbox"/> Disciplinary proceedings | <input type="checkbox"/> Retaliation | <input type="checkbox"/> Exercise of religion |
| <input type="checkbox"/> Excessive force by an officer | <input checked="" type="checkbox"/> Threat to safety | <input checked="" type="checkbox"/> Other: _____ |

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count III. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

FROM SEPT. OR OCT. OF 2021 TO JAN. OR FEB. OF 2022. THEN CPL STEVEN SWYGERT TOOK ME IN THE RESTROOM TO PERFORM A URINE TEST. HE MADE ME STRIP NAKED AND PUT MULTIPLE FINGERS IN MY ANUS MOVING THEM RAPIDLY BACK AND FORTH. HE SAID HE WAS SEARCHING FOR CONTRABAND AND THAT DRUGS WERE REPORTED. HE DID THIS THREE TIMES BETWEEN THE DATES LISTED ABOVE. I LATER FOUND OUT THIS WAS NOT STANDARD PROCEDURE AND THIS IS RAPE. STEVEN SWYGERT RAPED ME THREE TIMES UNDER THE GUISE OF SEARCHING FOR CONTRABAND. HE HARASSED ME SEXUALLY BY STARRING AT ME NAKED IN THE SHOWER AREA AND SAYING THINGS LIKE "HOW WOULD YOU LIKE A LITTLE SWYGERT IN YA?" HE WOULD LICK HIS LIPS AND WINK AT ME TO RUB IT IN. SEVERAL TIMES HE GRABBED MY CROTCH AND ON THE BUTTS.

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

I BLEED FROM MY RECTUM AND NOW HAVE A CONSTANT SORE BACK THERE. IT HAS NOT GONE AWAY SINCE IT STARTED. MENTAL ANGUISH. I BELIEVE SOMETHING TORE IN MY RECTUM AREA THAT CAUSED THE BLEEDING AND PAIN.

5. **Administrative Remedies:** HUMILIATION, NIGHTMARES.

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
- b. Did you submit a request for administrative relief on Count ~~III~~ V? ☒ Yes ☐ No
- c. Did you appeal your request for relief on Count ~~III~~ V to the highest level? ☒ Yes ☐ No
- d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. _____

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

COUNT V. CONT

WHEN I REFUSED TO LET SWYGERT PUT FINGERS IN MY ANUS, HE THREATENED ME WITH A MAJOR WRITE UP FOR REFUSING A DIRECT ORDER AND I WOULD BE PLACED IN THE SHU.

DURING SWYGERT'S EMPLOYMENT, HE WAS VERY VOCAL ABOUT HIS HOMOSEXUALITY, OFTEN TALKING ABOUT HIS BOYFRIEND/HUSBAND AND THEIR SEX ACTS. THIS WAS GENERALLY KNOWN THROUGHOUT THE PRISON.

THIS HAPPENED TO MULTIPLE OTHER INMATES AND REPORTED TO DOC OFFICIALS BUT AS FAR AS I KNOW WAS NEVER ADDRESSED WITH SWYGERT. HE WAS TERMINATED OR FORCED TO RESIGN ON OTHER ALLEGATIONS OF IMPROPER CONDUCT AGAINST AN OFFICER TO THE BEST OF MY KNOWLEDGE,

COUNT VI

1. The following constitutional or other federal right has been violated by the Defendant(s):
14TH AMENDMENT EQUAL PROTECTION/TREATMENT
1ST AMENDMENT RETALIATION
INTENTIONAL INFLECTION OF EMOTIONAL DISTRESS - STATELAW
2. Count VI involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)
- | | | |
|--|---|---|
| <input type="checkbox"/> Medical care | <input type="checkbox"/> Access to the court | <input type="checkbox"/> Mail |
| <input type="checkbox"/> Disciplinary proceedings | <input checked="" type="checkbox"/> Retaliation | <input type="checkbox"/> Exercise of religion |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Threat to safety | <input type="checkbox"/> Property |
| <input type="checkbox"/> Other: _____ | | |
3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count VI. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).
ON MULTIPLE DATES STEVEN SWYGERT LAID ME
IN AND LOCKED MY DOOR WHEN I WAS SUPPOSED
TO BE WORKING. WHEN I ASKED HIM WHY HE
LAID ME IN HE SAID "IF YOU'RE GONNA FILE A
GRIEVANCE ON ME THIS IS WHAT YOU GET-LOCKED
DOWN." EVERY OTHER HUNTER WORKER AND ORDERLY
WAS ALLOWED TO GO TO WORK AT THEIR RESPECTIVE
JOB
4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).
MENTAL ANGUISH
RETALIATION INJURY
5. **Administrative Remedies:**
- Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
 - Did you submit a request for administrative relief on Count VI? ☒ Yes ☐ No
 - Did you appeal your request for relief on Count VI to the highest level? ☒ Yes ☐ No
 - If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. _____

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

COUNT VII

1. The following constitutional or other federal right has been violated by the Defendant(s): STATE LAW SMALL CLAIMS/THEFT

2. Count VII involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)

<input type="checkbox"/> Medical care	<input type="checkbox"/> Access to the court	<input type="checkbox"/> Mail
<input type="checkbox"/> Disciplinary proceedings	<input type="checkbox"/> Retaliation	<input type="checkbox"/> Exercise of religion
<input type="checkbox"/> Excessive force by an officer	<input type="checkbox"/> Threat to safety	<input checked="" type="checkbox"/> Other: <u>SMALL CLAIMS - STATE LAW THEFT</u>

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count VII. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

I WAS NOT PAID FOR 36.5 HOURS OF WORK IN OCTOBER OF 2022. AT \$25/HOUR I WAS SHORTED \$9.13. TIM SCHNEIDER REFUSES TO APPROVE MY GRIEVANCE OR PAY.

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

I WAS NOT PAID \$9.13 BY THE DOC FOR WORK PROVIDED.

5. **Administrative Remedies:**

- Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
- Did you submit a request for administrative relief on Count VII? ☒ Yes ☐ No
- Did you appeal your request for relief on Count VII to the highest level? ☒ Yes ☐ No
- If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. _____

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

COUNT ~~VIII~~ **III**

1. The following constitutional or other federal right has been violated by the Defendant(s): ETH AMENDMENT MONELL CLAIM
STATE LAW NEGLIGENCE AND NEGLIGENT INFLECTION
OF EMOTIONAL DISTRESS CONSPIRACY CLAIM
2. Count ~~VIII~~ **III** involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)
☐ Medical care ☐ Access to the court ☐ Mail
☐ Disciplinary proceedings ☐ Retaliation ☐ Exercise of religion ☐ Property
☐ Excessive force by an officer ☐ Threat to safety ☒ Other: INADEQUATE NUTRITION
3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count ~~VIII~~ **III**. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).
SUMMIT DEFENDANTS WERE DELIVERED A COMPLAINT BY
THE US MARSHAL SERVICE SHOWING A 90 POUND WEIGHT
LOSS AMONG OTHER AILMENTS DUE TO A LACK OF CALORIES,
THEY DID NOTHING TO CHANGE OR ADJUST PLANNING
DIET AND SUBSEQUENTLY FROM 3-20-2021 TO 4-3-2021
CHRISTIANS LOST AN ADDITIONAL 16 POUNDS, THE COMPLAINT
WAS DELIVERED ON 1-14-2021 TWO FULL MONTHS
PREV TO CHRISTIAN'S SECONDARY WEIGHTLOSS, NO DIET
ADJUSTMENTS WERE MADE FOR NEARLY TWO YEARS
AFTER NOTIFICATION OF CHRISTIAN'S RISK OF INJURY,
MEALS CONSISTED OF LESS THAN 2000 CALORIES AND
SHOULD HAVE CONTAINED MORE THAN 3000 CALORIES,
CHRISTIANS 16 POUND WEIGHT LOSS WAS WHEN NEEDED
IN THE SHU WHERE HE WAS DEPENDANT SOLELY ON
SUMMIT PROVIDED FOODS AND DIDN'T HAVE
COMMISSARY, CHRISTIAN'S WEIGHTED 233 ON 3-20-21
AND 217 ON 4-3-2021 AND 238 JUST PRIOR TO THE SHU.
4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).
LOST 16 POUNDS IN TWO WEEKS, LOSS OF
STRENGTH MUSCLE ATROPHY, FATIGUE, HUNGER
PAINS, DIZZINESS, LIGHTHEADEDNESS, VOMITING, STOMACH
SICKNESS, DIARRHEA
5. **Administrative Remedies:**
- Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
 - Did you submit a request for administrative relief on Count ~~VIII~~ **III**? ☒ Yes ☐ No
 - Did you appeal your request for relief on Count ~~VIII~~ **III** to the highest level? ☒ Yes ☐ No
 - If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. _____

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

LEGAL USE ONLY

COUNT VII - CONT

FOR MANY YEARS WE WERE SERVED, ROTTEN, SPOILED AND/OR COMPLETELY DISGUSTING FOOD THAT WAS INEDIBLE. IT CAUSED SICKNESS AND VOMITING. VOMITING INCLUDED BOTH WHILE AN INMATE WAS EATING AND AFTER. IT WAS SO DISGUSTING AND INEDIBLE I (AND OTHERS) WOULD LITERALLY GAG ON THE FOOD AND VOMIT IN MY MOUTH WHILE TRYING TO FORCE IT DOWN. BOTH MYSELF AND MANY OTHER INMATES, I WOULD SAY THE VAST MAJORITY OF INMATES MADE SO MANY COMPLAINTS TO CBM/SUMMIT EMPLOYEES/SUPERVISORS AND DOC STAFF AND TOP ADMINISTRATORS THAT AT ONE POINT, EXECUTIVES FROM SUMMIT CAME IN TO VIEW AND CORRECT THE ISSUE. ULTIMATELY THE FOOD (BOTH INADEQUATE NUTRITION AND DISGUSTING, INEDIBLE FOOD) WAS NOT CORRECTED. IT SHOULD BE STATED SUMMIT ALSO RAN THE COMMISSARY PROGRAM FOR PROFIT CHARGING VERY HIGH PRICES FOR OTHERWISE INEXPENSIVE FOOD ITEMS. BOTH THE DOC AND SUMMIT PROFITED BY COMMISSARY SALES. THE CUSTOM AND/OR POLICY OF SUMMIT AND THE DOC WAS TO PROVIDE SUCH INEDIBLE FOOD (AND INADEQUATE AMOUNTS) IN ORDER TO INCREASE COMMISSARY SALES. I ALSO WANT TO STATE PORTIONS SERVED OFTEN WERE LESS THAN WHAT THE MENU STATED (WHICH WAS ALREADY INADEQUATE). WITH THE TERMINATION OF WARREN DARIN YOUNG AND OTHER DOC ADMINISTRATORS, NEW WARDEN DAN SULLIVAN MADE ISSUE OF THE TERRIBLE FOOD AND STATE DID NOT RENEW SUMMIT'S CONTRACT OPTING FOR NOW ARMARK (ALTHOUGH NOW MOSTLY EDIBLE, INADEQUATE NUTRITION TO MAINTAIN HEALTH, AND PORTIONS SMALLER THAN SPECIFIED STILL PERSIST).

YOUNG, DRESKE, PANTO, COOK, FLOWE, LEIDHOLT, SCHNEFFER (AS DOC OFFICIALS AT THE TIME) AND SUMMIT FOODS AND THEIR EMPLOYEES AND EXECUTIVES CONSPIRED TO DEPRIVE INMATES FOOD AND ADEQUATE NUTRITION IN

LEGAL USE ONLY

AN EFFORT TO REDUCE BUDGET COSTS, INCREASE REVENUE/PROFIT FROM BOTH THE COST OF STUNTING MONEY ON FOOD AND DRIVING UP COMMISSARY SALES OF WHICH BOTH PROFITED, INMATES WERE FORCED TO BUY ADDITIONAL COMMISSARY TO STAY FED AND MAINTAIN HEALTH, BY DOING SO DEFENDANTS VIOLATED OUR RIGHTS TO RECEIVE ADEQUATE NUTRITION, ADDITIONALLY, THE OFFICIALS CONSPIRED TO PROVIDE INCREASINGLY INADEQUATE NUTRITION TO INMATES HELD IN SHU AND A FLOOR TO FURTHER PUNISH INMATES WITH LESS FOOD CAUSING VARIOUS HEALTH CONSEQUENCES INCLUDING WEIGHT LOSS, MUSCLE ATROPHY, HUNGER PAINS/PANGS, FATIGUE, ETC, ALL WERE WELL AWARE OF THESE ALLEGATIONS ABOVE BUT SIMPLY ALWAYS REPLIED THE FOOD IS ADEQUATE, IT'S LIKE TRYING TO CONVINCE A REASONABLE CITIZEN (POSSIBLE JUROR) THAT THE SKY IS GREEN AND THE GRASS IS BLUE.

COUNT IX

1. The following constitutional or other federal right has been violated by the Defendant(s): MALPRACTICE
8TH AMENDMENT SUPERVISOR NEGLIGENCE
STATE LAW NEGLIGENCE/MEDICAL MALPRACTICE
NEGLIGENT/INTENTIONAL INFLECTION OF EMOTIONAL DISTRESS

2. Count IX involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)
- | | | | |
|--|--|---|-----------------------------------|
| <input type="checkbox"/> Disciplinary proceedings | <input checked="" type="checkbox"/> Medical care | <input type="checkbox"/> Access to the court | <input type="checkbox"/> Mail |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Retaliation | <input type="checkbox"/> Exercise of religion | <input type="checkbox"/> Property |
| <input type="checkbox"/> Threat to safety | <input type="checkbox"/> Other: _____ | | |

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count IX. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

ON OCTOBER 11, 2023, I TALKED TO NURSE PRACTITIONER
JULIE COX WHO CHANGED THE DOSAGE OF MY
HYDROXYLINE TO A LOWER INEFFECTIVE LEVEL
AND CHANGE THE TIME TO AN INEFFECTIVE TIME
TAKEN. I HAVE TRIED BOTH THE LOWER DOSAGE
AND TIME FRAME IN THE PAST AND IT WAS
INEFFECTIVE THEN AS WELL. SHE ALSO REFUSED
TO ADDRESS MY OCD SYMPTOMS THAT I
HAVE BEEN TAKING MEDICATION FOR FOR AT
LEAST FOUR YEARS. SHE HAS ABSOLUTELY NO
REASON TO CHANGE THE DOSAGE AS I REPORTED
THE CURRENT DOSAGE AND TIME FRAME WAS
HELPFUL. IT WAS PRESCRIBED BY PREVIOUS
DOCTORS. JULIE COX HAS SINCE REFUSED TO
SEE ME AND IT HAS BEEN TWO MONTHS.
I AM CURRENTLY ON NO MEDICATION DUE TO JULIE COX
THAT NUMEROUS PROFESSIONALS DEEMED NECESSARY.

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

SEVERE MENTAL ANGUISH, INSOMNIA, TICS,
DELUSIONS, PARANOID THOUGHTS, SWEETS, CHILLS,
NAUSEA, HEADACHES, CONFUSION, SOMATIC PAIN,
HUMILIATION, DYSLIPIDEMIA, METABOLIC SYNDROME, COGNITIVE,
MEMORY, AND PERFORMANCE DEFICITS

5. **Administrative Remedies:**
- Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
 - Did you submit a request for administrative relief on Count IX? ☒ Yes ☐ No
 - Did you appeal your request for relief on Count IX to the highest level? ☒ Yes ☐ No
 - If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. _____

Count
from
above →

WHILE HAVING A MENTAL HEALTH EMERGENCY I ASKED LT. GRABE
FOR ASSISTANCE AND TO CALL MENTAL HEALTH TO ASSIST, HIS
REPLY WAS "NO," WHICH COMPOUNDED THE DISTRESS I WAS UNDER.

COUNT IX CONT.

MULTIPLE PRIOR PSYCHIATRISTS HAVE ALL DEEMED A BEDTIME DOSAGE OF MEDICINE APPROPRIATE FOR MY CARE. COX ALSO CHANGES THE HYDROXYZINE DISTRIBUTION TIME TO A MUCH EARLIER TIME WHICH WAS PREVIOUSLY TRIED AND DEEMED INEFFECTIVE. THE HYDROXYZINE DOSE WAS ORIGINALLY PRESCRIBED BY PSYCHIATRIST KRISTEN HANZLIK FOR BEDTIME. HANZLIK ALSO ORIGINALLY PRESCRIBES THE LOWEST DOSAGE OF HYDROXYZINE BUT RAISED IT AFTER A COUPLE OF WEEKS TO THE NEXT DOSAGE DUE TO THE PRIOR NOT WORKING/HELPING. AGAIN THIS WAS REDUCED BY COX FOR NO APPARENT REASON BACK TO THE INEFFECTIVE LEVEL AND NO OTHER TREATMENT OPTIONS WERE OFFERED.

ON JANUARY 10, 2024 (THREE MONTHS AFTER INITIAL VISIT AND FOUR MONTHS AFTER COMING OFF OTHER MEDICATION FOR OCD) I WAS SEEN BY JULIE COX AGAIN. THIS WAS AFTER DOZENS OF KITES, GRIEVANCES AND CONVERSATIONS WITH MULTIPLE HEALTH/BEHAVIORAL SERVICES STAFF AND DOC STAFF (EXPLAINING MY MENTAL HEALTH CONCERNS, AGONY, PAIN, ISSUES BEGGING FOR ASSISTANCE). COX, AGAIN REFUSED TO ADDRESS MY OCD SYMPTOMS (PREVIOUSLY DIAGNOSED AND TREATED BY MULTIPLE PSYCHIATRISTS) OR RESULTING ANXIETY OR INSOMNIA OF NO MEDICATION. SHE DID REINSTATE THE HYDROXYZINE TO THE LOWEST INEFFECTIVE LEVEL WHICH SHE WAS REPEATEDLY TOLD DID NOT HELP. SHE OFFERED NO OTHER OPTIONS, IN FACT REFUSED. SHE STATED SHE WOULD SEE ME IN "ABOUT A MONTH."

ON FEBRUARY 7, 2024 COX SEEN ME AGAIN AND FINALLY ADDRESSED MY OCD. SHE SUGGESTED PROZAC AND FLUOXETINE WHICH COULD TAKE WEEKS TO BECOME EFFECTIVE AND DOSE CHANGES COULD BE ADDRESS LATER. I EDUCATED HER THAT I BELIEVED

COUNT IX CON'T.

BOTH OF THOSE FOR MANY MONTHS AT VARYING DOSES AND THEY WERE NOT EFFECTIVE FOR OCD. SHE THEN ASKED IF SHE HAD MY RECORDS. I STATED I HAD BEEN TREATED FOR OVER FIVE YEARS BY PRISON MENTAL HEALTH. AT THIS POINT SHE STATED SHE WOULD REVIEW MY CHART AND SEE ME IN A WEEK WITH A NEW MEDICATION PLAN TO ADDRESS OCD. SHE AGAIN REFUSED THE NEXT LEVEL DOSAGE OF HYDROXYZINE. IT HAS NOW BEEN NEARLY TWO MONTHS SINCE THIS LAST VISIT AND MS. COX OR ANYONE ELSE FROM MENTAL HEALTH HAS SEEN ME. IT HAS BEEN NEARLY EIGHT MONTHS OF NO SPECIFIC MEDICATION FOR OCD AND SIX MONTHS SINCE THE REDUCTION IN HYDROXYZINE WITH NO OTHER OPTIONS FOR TREATMENT.

KAYLA THELEN IS THE MENTAL HEALTH SUPERVISOR WHO FAILED TO MONITOR, TRAIN OR SUPERVISE THE ABOVE PROVIDER OR ASSUME RESPONSIBILITY FOR MY CARE AND TREATMENT AFTER SHE WAS INFORMED OF THE MISTREATMENT/NEGLIGENCE/DELAY OF COX.

WASKO, BITTINGER, AND HAYNES ALL RESPONSIBLE FOR THE LACK OF ADEQUATE STAFF TO PROVIDE TIMELY MENTAL HEALTH CARE OR SUPERVISION OF WHICH THEY WERE INFORMED. AT ONE POINT THERE WAS NO PSYCH PROVIDER AT ALL TO ADDRESS HUMAN NEEDS.

ON APPROX. MARCH 28, 2024 I WAS TOLD I'D BE SEEN IN SIX WEEKS TO ADJUST MEDS. IT HAS NOW BEEN ABOUT 13 WEEKS AND I HAVE NOT BEEN SEEN. I'VE KITED MULTIPLE TIMES AND SPOKE TO LIZ MULTIPLE TIMES ABOUT NOT BEING SEEN AND I HAVE HAD NO OR ZERO COMMUNICATION BACK ABOUT A POSSIBLE APPOINTMENT WITH A PSYCH DOC. CASSANDRA DID NOT RESPOND TO MULTIPLE KITES ASKING ABOUT TREATMENT AND HER SUPERVISOR THELEN DID NOT RESPOND TO INQUIRES ABOUT THE LACK OF KITE RESPONSES.

COUNT ~~2~~ X

1. The following constitutional or other federal right has been violated by the Defendant(s): 8TH AMENDMENT ANY OTHER APPLICABLE CONSTITUTIONAL AMENDMENT AND STATE LAW NEGLIGENCE AND NEGLIGENT INFLECTION OF EMOTIONAL DISTRESS
2. Count ~~X~~ involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)
- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Medical care | <input type="checkbox"/> Access to the court | <input type="checkbox"/> Mail |
| <input type="checkbox"/> Disciplinary proceedings | <input type="checkbox"/> Retaliation | <input type="checkbox"/> Exercise of religion |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Threat to safety | <input checked="" type="checkbox"/> Other: <u>MENTAL HEALTH</u> |

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count ~~X~~. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

I HAVE NOT BEEN PROVIDED MENTAL HEALTH CARE FOR APPROX. SEVEN MONTHS. I INFORMED WARDEN TERESA BITTNER, KELIE WASKO, KNYLA THELEN AND CIERRA REVOLARIO THROUGH MULTIPLE GRIEVANCES AND KITES OF THE TREATMENT (LACK THERE OF), DELAYS (EXCESSIVE) BETWEEN APPOINTMENTS, INAPPROPRIATE RESTRICTION OF MEDICATIONS DEEMED NECESSARY/APPROPRIATE FOR TREATMENT AND TIME RESTRICTIONS OF MEDICATIONS DISTRIBUTED (FACILITY WIDE NOT BASED ON INDIVIDUAL TREATMENT PRESCRIPTIONS BY DOCTORS ORDERS) ALL RELATING TO MY MENTAL HEALTH CARE. THIS IS DUE TO NURSE/STAFF NEGLIGENCE AND STAFFING SHORTAGES ABLE TO PROVIDE ADEQUATE CARE AND ATTENTION. ALSO LACK OF TRAINED THERAPIST TO PROVIDE DAILY/WEEKLY THERAPY NOW LIMITED TO ONE TIME MONTHLY AND THE THERAPIST THEMSELVES ARE UNDER TRAINED IN THE FIELD AND LACK SUPERVISION. ALL PARTIES WERE INFORMED OF WORKY LISTED BELOW. (CONT)

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

EXTREME MENTAL ANGUISH, INSOMNIA, HEADACHES, HIGH CHOLESTEROL, SOMATIC PAIN, CONFUSION, LACK OF COMPREHENSION/CONCENTRATION, DISTRESS, ANXIETY, HUMILIATION (FROM ABOVE) AARON HAYNES, THELEN, REVOLARIO, BITTNER AND WASKO ALL

5. **Administrative Remedies:** RESPONSIBLE PARTIES FOR POLICY SETTING/HIRING.

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
- b. Did you submit a request for administrative relief on Count ~~X~~? ☒ Yes ☐ No
- c. Did you appeal your request for relief on Count ~~X~~ to the highest level? ☒ Yes ☐ No
- d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. SOME RESPONSES ARE PAST DOC REPLY TIMES AND I'M UNSURE IF I WILL GET AN ANSWER. WILL CONTINUE TO PURSUE, BUT HAVE NOT BEEN ADVISED OF A TIME EXTENSION

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

THEIR (DOC) (JULIE COX) OFFICIAL POLICY LIMITS, RESTRICTS, WILL NOT ALLOW OR PROVIDE CERTAIN DOCTOR PRESCRIBED MEDICATIONS OR ANY SUBSTITUTE INCLUDING, SLEEPING MEDICATION AND ADHD.

CIVIL RIGHTS COMPLAINT

COUNT ~~XI~~

1. The following constitutional or other federal right has been violated by the Defendant(s): _____

FIRST AND FOURTEENTH AMENDMENTS

EQUAL PROTECTION / TREATMENT

FAILURE TO TRAIN

2. Count ~~XI~~ involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)
- | | | |
|--|---|---|
| <input type="checkbox"/> Medical care | <input checked="" type="checkbox"/> Access to the court | <input type="checkbox"/> Mail |
| <input type="checkbox"/> Disciplinary proceedings | <input type="checkbox"/> Retaliation | <input type="checkbox"/> Exercise of religion |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Threat to safety | <input type="checkbox"/> Property |
| <input type="checkbox"/> Other: _____ | | |

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count ~~XI~~. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

THERE IS NO TRAINED LEGAL ASSISTANT TO HELP DELIVER LAW LIBRARY OR PROPERLY FILE PLEADINGS, LAW LIBRARY IS OPEN (DAILY / WEEKLY) INACCESSIBLE WHEN NEEDED. THERE IS NO STAFF TO RECEIVE OR DELIVER LEGAL MAIL TIMELY CAUSING DELAYS BY A WEEK OR LONGER (ONE ONE OCCASION OVER A MONTH). WHEN THERE IS STAFF FOR MAIL, INMATE REQUESTS TO SEND ARE DENIED AS STAFF IS "TOO BUSY" OR "NOT THEIR JOB" RESULTING IN MANY DAYS TO WEEKS DELAY IN MAILING FROM DATE DOCUMENTS WERE PREPARED. THIS RESULTS IN RUSHED OR POORLY PREPARED PLEADINGS AS THIS INMATE (AND OTHERS) MUST FACTOR IN WEEKS ADVANCE TO SUBMIT DOCUMENTS RESULTING IN VERY LIMITED TIME TO RESPOND / REPLY / PLEAD WHICH IS PREJUDICIAL. THIS IS COMPOUNDED BY NO TIMELY ACCESS TO THE LAW LIBRARY AND NO INSTRUCTIONS, ON MORE THAN ONE OCCASION BOTH INCOMING AND OUTGOING MAIL WERE OPENED OUTSIDE OF MY PRESENCE, SPECIFICALLY

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).
\$303.00 LOST ON APPEAL, RELIEF DENIED FOR POSSIBLY SUCCESSFUL CLAIM, ON MERITS, PREJUDICE ON PLEADINGS FROM UNTIMELY MAIL AND LACK OF CONSISTENT LAW LIBRARY, MISSING LEGAL DOCUMENTS AND NO INSTRUCTION ON LAW LIBRARY OR INTERPRETATION.

5. **Administrative Remedies:**

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
- b. Did you submit a request for administrative relief on Count ~~XI~~? ☒ Yes ☐ No
- c. Did you appeal your request for relief on Count ~~XI~~ to the highest level? ☒ Yes ☐ No
- d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. VERBAL GRIEVANCES NOT ADDRESSED, GRIEVANCES NOT SUPPLIED (FORMS), SUBMITTED FORMS NOT REPLIED TO

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

LEGAL USE ONLY

COUNT XI - CON'T

ON AT LEAST TWO OCCASSIONS I SENT A LETTER TO THE FEDERAL JUDGE, SEALED THE ENVELOPE IN THE D.O.C.'S OFFICERS PRESENCE AND FOUND OUT YEARS LATER THIS WAS REOPENED/REVIEWED AND PUT INTO A NEWLY ADDRESSED ENVELOPE BEFORE MAILING BY A D.O.C. OFFICIAL (SETH HUGHES ASSUMINGLY AT THIS POINT), ON OTHER OCCASSIONS DOCUMENTS NEVER REACHED THEIR DESTINATION AND HAD TO BE RESENT UPON REALIZATION OF THIS. AND AT LEAST ONCE A LETTER FROM THE COURT CONTAINING APPEAL INSTRUCTIONS WAS OPENED OUTSIDE MY PRESENCE BEFORE BEING DELIVERED TO ME. THE APPEAL INSTRUCTIONS WERE NOT DELIVERED (REMOVED BY D.O.C. ASSUMING IT WAS NOT COURT CLERK ERROR). I ONLY DISCOVERED THE MISSING DOCUMENTS AT A MUCH LATER DATE UPON REVIEW OF A DOCKET. THIS CAUSES AN APPARENT PROCEDURAL ERROR IN THE APPEAL AT A COST OF \$505.00. THIS WOULD INITIALLY APPLY TO WASKO AND BITTNER AS TOP LEVEL ADMINISTRATORS IN CHARGE OF THIS POSITION. ALSO MAIL OFFICER AND TIM SCHNEIDER, TAYLOR YOST, GENIE BERTSCH (AS DIRECT SUPERVISOR OF JAMESON ANNE) SETH HUGHES AND POSSIBLY OTHERS THAT MAY BE DETERMINED THROUGH DISCOVERY. ALL INTRINSIC OF ISSUES.

INMATES AT OTHER D.O.C. FACILITIES ARE ALLOWED COMPUTER USAGE FOR DOCUMENTS/WORK AT A COMPUTER LAB (MULTIPLE COMPUTERS). JAMESON IS LIMITED TO ONE PORTABLE NON-FUNCTIONING COMPUTER WHICH I HAVE NOT BEEN ALLOWED TO USE IN ABOUT FOUR YEARS. CURRENTLY, ALTHOUGH I STILL HAVE NOT BEEN ABLE TO USE IT, THE COMPUTER ALLEGEDLY HAS BEEN FIXED, HOWEVER THE ATTACHED PRINTER DOES NOT FUNCTION IN WHICH TO PRINT A DOCUMENT. ONE INMATE WAS ALLOWED SPECIAL PRIVILEGE TO USE A WORKING COMPUTER AND PRINTER IN THE LIBRARY FOR HIS LEGAL WORK (AT LEAST ONE INMATE - TWO I'M PERSONALLY AWARE OF). I WAS DENIED THIS PRIVILEGE.

COUNT ~~XII~~

1. The following constitutional or other federal right has been violated by the Defendant(s): _____

EIGHTH AMENDMENT

FIRST AMENDMENT - RETALIATION

2. Count ~~XII~~ involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)
- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Medical care | <input type="checkbox"/> Access to the court | <input type="checkbox"/> Mail |
| <input type="checkbox"/> Disciplinary proceedings | <input type="checkbox"/> Retaliation | <input type="checkbox"/> Exercise of religion |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Threat to safety | <input checked="" type="checkbox"/> Other: <u>INADEQUATE FOOTWEAR</u> |

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count ~~XII~~. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

DURING MY ENTIRE PRISON STAY THE DOC DETERMINES I HAD WIDE FEET AND PROVIDED ACCOMODATING FOOTWEAR, INITIALLY FOR THE FIRST SIX YEARS THESE WERE VELCRO, THEN I DEVELOPED ARTHRITS IN MY FEET AND CUSTOM MADE ORTHODICS WERE MADE BY A SPECIALIST FOR RELIEF. THE INSTRUCTIONS FOR THE ORTHODICS TO BE EFFECTIVE REQUIRED A LACE UP SHOE, THIS WAS PROVIDED FOR ROUGHLY THE NEXT SIX YEARS, UPON REQUEST FOR A NEW PAIR OF SHOES IN JANUARY 2024, A NARROW FIT SHOE WAS PROVIDED. I TRIED THE SHOES BUT THEY CAUSED SEVERE BLISTERING ON MY FEET, CAUSING LACERATIONS AND BLEEDING. I REQUESTED A SHOE THAT FIT ME AND THE CUSTOM ORTHODICS, I WAS GIVEN THE "RUN AROUND" ABOUT A DOZEN TIMES, WAS REFERRED TO A DOCTOR WHO RECOMMENDED A WIDER SHOE, THIS WAS DENIED. RATHER THEY REFERRED ME TO A SPECIALIST WHO AGAIN SAID I NEED A WIDE FIT LACE UP SHOE AND SAID HE'D

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

BLEEDING, CUTS/LACERATIONS AND BURNS ON FEET, NO SHOES TO WEAR, INCREASED ARTHRITS PAIN DUE TO INADEQUATE FOOTWEAR FOR ORTHODICS AND \$90.00 BUYING SHOES TO TRY TO FIND RELIEF.

5. **Administrative Remedies:**

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
- b. Did you submit a request for administrative relief on Count ~~XII~~? ☒ Yes ☐ No
- c. Did you appeal your request for relief on Count ~~XII~~ to the highest level? ☒ Yes ☐ No
- d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. I FILED ON ONE OFFICIAL BUT AM IN

~~CONSIDERABLE~~ FEAR OF THE OTHERS FOR POSSIBLE FURTHER NEGATIVE ACTIONS WHICH CAN FURTHER JEOPARDIZE MY HEALTH AND SAFETY.

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

ADDITIONALLY PAST GRIEVANCES OF RETALIATION WAS SUPPORTED/DENIED BY DOC AND/OR ASSURANCE OF MORE ESCALATING RETALIATION IF I FILED ONE.

CIVIL RIGHTS COMPLAINT

LEGAL USE ONLY

COUNT XII - CONT

RECOMMEND THE SAME SHOE I CURRENTLY HAVE, THIS HAS BEEN DENIED. THEN THEY OFFERED ME AN INADEQUATE (AND WRONG WIDTH) MEDICAL SHOE (AFTER REPEATEDLY DENYING SUCH SHOE EARLIER). THEY'VE NOW SPENT AN ESTIMATE OF SEVERAL THOUSAND DOLLARS ON DOCTORS AND SPECIALISTS IN AN EFFORT TO TRY SOMEONE WHO WOULD RECOMMEND THAT I SHOULDN'T GET A WIDE LAST UP SHOE, RATHER THAN PAY \$30.00 OR LESS OR POSSIBLY SLIGHTLY MORE (MAYBE AS HIGH AS \$80.00). IT'S BEEN DEMONSTRATED PREVIOUSLY AND HAS BEEN SUPPLIED FOR OVER A DECADE A WIDE SHOE. PRIOR DETERMINATIONS WERE BY DOC'S OWN OFFICIALS, DOCTORS AND OUTSIDE PROVIDERS BOTH SIX YEARS AGO AND NOW CURRENT. AND I'M STILL BEING DENIED A PROPER SHOE AS OF JANUARY 2024. THE MONEY THEY SPENT IN RECENT EFFORTS TO DENY ME A PROPER SHOE COULD HAVE SUPPLIED ME SHOES FOR THE NEXT 20 TO 50 YEARS. IT'S RIDICULOUS. AND I WANT TO ADD I NOW HAVE PERMANENT SCARRING ON MY FEET FROM THE LATEST SHOES THEY PROVIDED AS DESCRIBED ABOVE FROM BLISTERS AND LACERATIONS. I'VE FILED MULTIPLE GRIEVANCES ON THIS AND PRIOR LAWSUITS ON OTHER TOPICS/ISSUES AND WITH THEIR EFFORT TO DENY ME SHOES AND CONTINUED DENIAL SHOWS AN OBVIOUS CONNECTION TO RETALIATION.

THE EIGHTH AMENDMENT AND RETALIATION CLAIMS SHOULD APPLY TO BITTNER, SCHWEIDER, RYAN LANDON, BERSCH AND VANDERGA. BITTNER WAS SPIKE TO PERSONALLY ABOUT ISSUE AND DID NOT RESPOND TO SUBSEQUENT KITE. SCHWEIDER AND VANDERGA WERE UNIT MANAGERS IN CHARGE OF ORDERING SHOES, LANDON IS H.S. SUPERVISOR WHO CONTINUALLY DENIED SHOES AND ATTEMPTED TO THWART EFFORTS. BENTING ALSO INFORMED AND MADE NO AFFIRMATIVE ANSWER THAT ISSUE WOULD BE RESOLVED,

XIII
COUNT ~~13~~

1. The following constitutional or other federal right has been violated by the Defendant(s):

FIRST AMENDMENT RETALIATION FOURTEENTH AMENDMENT
EQUAL PROTECTION/TREATMENT NEGLIGENT/INTENTIONAL
XIII INFLECTION OF EMOTIONAL DISTRESS

2. Count ~~13~~ involves: (Check **only one**; if your claim involves more than one issue, each issued should be stated in a different count)
- | | | |
|--|---|---|
| <input type="checkbox"/> Medical care | <input type="checkbox"/> Access to the court | <input type="checkbox"/> Mail |
| <input type="checkbox"/> Disciplinary proceedings | <input checked="" type="checkbox"/> Retaliation | <input type="checkbox"/> Exercise of religion |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Threat to safety | <input type="checkbox"/> Property |
| <input type="checkbox"/> Other: _____ | | |

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count ~~13~~ Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

OFFICER PENNY LINDSAY HAD BEEN TREATING ME DIFFERENT
THAN OTHER INMATES, KEEPING ME LOCKED DOWN FOR
EXTRA TIME OR RELEASING ME LATE TO WORK, I BROUGHT
THIS VERBALLY TO U.M. SCHWILDER. THEN IT GOT WORSE. NOT
ONLY DID PROR EVENTS KEEP OCCURRING BUT SHE WOULD NOW
NOT OPEN MY CELL DOOR TO USE THE RESTROOM, KEEP
ME (NOT OPENING) FROM ACCESS TO HALL GATES TO TRAVEL TO
MY JOB SHE WOULD YELL AND SCREAM, SHE ALLOWED
OTHER INMATES OUT DURING NON-WORKING HOURS BUT
DIRECT OTHER OFFICERS TO LOCK ME UP IF I ATTEMPTED
THIS AND TRIED TO WORK, EACH TIME I REPORTED HER
INCREASED NEGATIVE ACTIONS/DISPARAGE IN TREATMENT THE
EVENTS/RETALIATION INCREASED. IN FACT, SO MUCH SO THE
DOC'S OWN OFFICERS MADE COMMENTS TO ME SUCH AS
"SHE MUST REALLY HATE YOU," OR "WHY DOESN'T SHE LIKE YOU?"
OR "SHE HAS A PROBLEM WITH YOU DOESN'T SHE?" AND

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

MENTAL DISTRESS, LACK OF PAY FOR WORK, LOSS OF
SIGNIFICANT AND MUCH NEEDED PROPERTY

5. **Administrative Remedies:**

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? **XIII** ☒ Yes ☐ No
- b. Did you submit a request for administrative relief on Count ~~13~~ **XIII** ☒ Yes ☐ No
- c. Did you appeal your request for relief on Count ~~13~~ **XIII** to the highest level? ☒ Yes ☐ No
- d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. GRIEVANCES FILED AND VERBALLY SOUGHT
AS ABLE TO BE COMPLETED. I ATTEMPTED TO FILE TWO
ADDITIONAL GRIEVANCES BUT WAS REFUSED BY ALL STAFF

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

FOR THE PAST SIX DAYS (DOC REFUSED TO ACCEPT)

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COUNT XIII CONT

MOST RECENTLY UPON BEING RELEASED FROM THE SHU ON FALSE CHARGES I LEARNED LINDSAY WAS IN CHARGE OF MY CELL PACKUP INVENTORY. UPON UNPACKING I WAS MISSING SEVERAL ITEMS OF PERSONAL PROPERTY. SOME ITEMS WERE SIMPLY EXCHANGED FOR LESSER QUALITY ITEMS (I.E. PURCHASED BOXER BRIEFS WHITE IN COLOR WERE REPLACED WITH STATE ISSUED BROWN BOXER THAT WERE NOT EVEN MY SIZE).

I WAS CHARGED WITH AN M-6 CONDUCT CHARGE ON JUNE 13, 2024. IMMEDIATELY VANDERAA FIRED ME FROM MY JOB. THIS IS AGAINST POLICY AND IN OPPOSITE OF OTHER INMATES. JUST THE PREVIOUS MONTH ANOTHER INMATE WAS ACCUSED OF MUCH MORE SERIOUS ALLEGATIONS, NOT ONLY DID HE ~~NOT~~ GO TO THE SHU ON VANDERAA'S CHARGES, HE KEPT HIS JOB DURING THE ENTIRE DISCIPLINARY PROCEDURE. ADDITIONALLY, HE WAS ISOLATED IN HIS CELL FOR A FEW DAYS, NOT WORKING AND RECEIVED BACK PAY FOR THOSE DAYS, ALSO A FEW MONTHS EARLIER FOUR INMATES WENT TO THE SHU ON SERIOUS CHARGES ALL KEPT THEIR JOBS UPON RELEASE AND AT LEAST THREE RECEIVED BACK PAY AS I'M AWARE OF. I'M INNOCENT OF THE DISCIPLINARY CHARGE TO WHICH VANDERAA SAID EVEN IF I SOMEHOW GOT MY JOB BACK HE WOULDN'T GIVE BACK PAY. VANDERAA FIRED ME W/O ANY CAUSE OF MYSELF AND ON PURE RUMOR OF CONDUCT AS HE STATED TO ME ON JUNE 18 HE "DID NOT EVEN READ THE WRITE UP REPORT, JUST HEARD ABOUT IT." THERE IS NO DOUBT I FILE GRIEVANCES BUT I SPECIFICALLY TOLD VANDERAA THE PREVIOUS WEEK I'D SUE HIM IN FEDERAL COURT BY LAWSUIT IF HE DIDN'T ORDER ME PROPER FOOTWEAR (SEE COUNT XII). JUST THE VERY NEXT WEEK THE ABOVE OCCURED, AGAINST POLICY AND CONTRADICTING HIS OWN ACTIONS OF ANOTHER INMATE AND OTHERS MONTHS EARLIER ACCUSED OF MUCH MORE SERIOUS ALLEGATIONS. HE ALSO WOULD NOT RETURNED SEIZED PROPERTY, AND DENIED ME COMMISSARY 32 PRIVILEGES AGAINST POLICY.

XIV
COUNT

1. The following constitutional or other federal right has been violated by the Defendant(s):

8TH AMENDMENT NEGLIGENT/INTENTIONAL INFLECTION OF
EMOTIONAL DISTRESS ADA AND REHABILITATION ACT DISCRIMINATION
ACCOMMODATION XIV AND RETALIATION STATE LAW NEGLIGENCE

2. Count 14 involves: (Check only one: if your claim involves more than one issue, each issued should be stated in a different count)

☐ Medical care ☐ Access to the court ☐ Mail
☐ Disciplinary proceedings ☐ Retaliation ☐ Exercise of religion ☐ Property
☐ Excessive force by an officer ☐ Threat to safety ☒ Other: ADA ACCOMMODATION/

DISCRIMINATION. XIV

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count 14. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

I SUFFER FROM SEVERE OCD (DISABILITY), SO SEVERE ONE
PROVIDER SAID ITS THE WORST HE'S HEARD/DELT WITH. IT
CAUSES SEVERE INSOMNIA (I ONLY SLEEP A COUPLE
HOURS A NIGHT-MAX FOUR-AND IT'S ALL INTERRUPTED-
NOT AT ONE TIME). MY OCD IS NOT CORRECTED THUS FAR,
SLEEP WAS THE ONLY THING PROVIDING SOME RELIEF AND WAS
TREATED (AS POSSIBLE W/ OPTIONS AVAILABLE) BY PROVIDERS FOR
AT LEAST THE PAST APPROX. SIX YEARS WITH MEDICATION. NOW
THE DOC'S OFFICIAL POLICY IS NO TREATMENT FOR SLEEP ISSUES,
THIS LACK OF SLEEP EXASPERATES MY OCD AND IT, ALONG
WITH LITTLE TO NO SLEEP IS MENTALLY PAINFUL AND
CAUSES PHYSICAL AILMENTS. SINCE THEY WILL NOT TREAT
SLEEP I REQUESTED ACCOMMODATIONS TO HELP SLEEP OF
A COMFORT MATTRESS (AVAILABLE IN THE INFIRMARY) AND PILLOW
AND/OR PROPER MEDICATION TO INDUCE SLEEP. I ALSO
REQUESTED TO SEE THE ADA PSYCHIATRIST- PROVIDER,
ALL WAS DENIED SO I GRIEVED IT. THE GRIEVANCES...

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

INSOMNIA, DYSLIPIDEMIA, METABOLIC SYNDROME, MENTAL
DISTRESS, FATIGUE, WEAKNESS, CHEST PAINS (CRIPPLING),
CONFUSION, MENTAL FOG, COGNITIVE DECLINE, TICS,
HEDARCHES, PERFORMANCE DEFICITS, LACK OF UNDERSTANDING,

5. **Administrative Remedies:** SEEMINGLY SIMPLE THINGS/DIRECTION,

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
b. Did you submit a request for administrative relief on Count 14? ☒ Yes ☐ No
c. Did you appeal your request for relief on Count 14 to the highest level? ☒ Yes ☐ No
d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. I'VE BOTH VERBALLY AND BY FORM
SUBMITTED GRIEVANCES TO THE EXTENT ALLOWED AFTER
NO REPLIES WERE GIVEN.

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

LEGAL USE ONLY

COUNT XIV - CONT

DID NOT RECEIVE AN ANSWER. ACCORDING TO POLICY THEY ARE TO BE FORWARDED TO THE FACILITY ADA REP MELISSA MATURIN (WHO HAPPENS TO ALSO BE THE GRIEVANCE DESIGNEE FOR ALL PRISON INMATE ISSUES), AND THE ADA AGENCY ADMINISTRATOR. I KITED MELISSA MATURIN ABOUT MY GRIEVANCE, SHE DID NOT REPLY. I ALSO KITED ABOUT THE ADA AGENCY ADMINISTRATOR / COORDINATOR TRYING TO GET CONTACT INFORMATION (NAME, ADDRESS, PHONE, EMAIL) TO FIND OUT ABOUT THE GRIEVANCE OR HAVE MY FAMILY CONTACT THAT INDIVIDUAL. I RECEIVED NO REPLY. I ALSO REQUESTED ACCOMODATION FOR LEGAL HELP DUE TO SEVERE MENTAL FOG AND COGNITIVE DECLINE WHERE I CAN'T UNDERSTAND SEEMINGLY SIMPLE LOGIC OR DIRECTIONS, ALSO DENIED. JACK WAYNER TOOK MY GRIEVANCES, BITTNGER AND WASKO WERE MADE AWARE OF REQUESTS FOR ACCOMODATION THROUGH TREATMENT BUT REFUSED. WASKO STATED IT WAS NOT AN ADA ISSUE. THIS IS ALSO (BY MELISSA MATURIN RESPONSE / DOC POLICY) A DISCRIMINATION BASED ON MY DISABILITY. MATURIN SAID MY REQUESTS WERE ALSO DENIED SPECIFICALLY DUE TO MY MENTAL ILLNESS (DISABILITY).

LEGAL USE ONLY

D. REQUEST FOR RELIEF-CONT

THIS PAGE IS A CONTINUATION OF THE FOLLOWING PAGE
BUT INTENTIONALLY PLACED TO PRECEED SIGNATURE PAGE,

COUNT 10 - \$500,000 COMPENSATORY/PUNITIVE DAMAGES AND
DECLARATORY AND INJUNCTIVE RELIEF

COUNT 11 - \$500,000 COMPENSATORY/PUNITIVE DAMAGES AND
DECLARATORY AND INJUNCTIVE RELIEF

COUNT 12 - \$10,000 COMPENSATORY/PUNITIVE DAMAGES AND
DECLARATORY AND INJUNCTIVE RELIEF

COUNT 13 - \$20,000 + RETURN OF EXACT OR BETTER
PROPERTY, COMPENSATORY AND PUNITIVE DAMAGES AND
DECLARATORY AND INJUNCTIVE RELIEF

COUNT 14 - \$40,000/DAY COMPENSATORY, \$100,000 DAY PUNITIVE
DAMAGES AND DECLARATORY AND INJUNCTIVE RELIEF; PER
PERSON

D. REQUEST FOR RELIEF

State briefly what you want the Court to do for you.

COUNT 1 - \$40.00/DAY COMPENSARY, \$100.00/DAY PUNITIVE FOR VIOLATION AND DECLARATORY AND INJUNCTIVE RELIEF; PER PERSON
 COUNT 2 - \$40.00/DAY COMPENSARY, \$100.00/DAY PUNITIVE FOR VIOLATION AND DECLARATORY AND INJUNCTIVE RELIEF; PER PERSON
 COUNT 3 - \$40.00/DAY COMPENSARY, \$100.00/DAY PUNITIVE FOR VIOLATION AND DECLARATORY AND INJUNCTIVE RELIEF; PER PERSON
 COUNT 4 - \$500,000 FOR COMPENSARY AND PUNITIVE DAMAGES
 COUNT 5 - \$3,000,000 FOR COMPENSARY AND PUNITIVE DAMAGE AND DECLARATORY AND INJUNCTIVE RELIEF
 COUNT 6 - \$5000 COMPENSARY AND PUNITIVE RELIEF
 COUNT 7 - \$9.13 COMPENSARY AND DECLARATIVE RELIEF
 COUNT 8 - \$40.00/DAY COMPENSARY AND \$100.00/DAY PUNITIVE FOR VIOLATION AND DECLARATORY AND INJUNCTIVE RELIEF; PER PERSON OR ENTITY - COUNT 9 - \$500,000 COMPENSARY/PUNITIVE FOR MAL PRACTICE; \$500,000 COMPENSARY/PUNITIVE FOR OTHER VIOLATIONS, DECLARATORY AND INJUNCTIVE RELIEF

I declare under penalty of perjury that the foregoing is true and correct.

Executed on JUNE 26, 2024
 DATE



SIGNATURE OF PLAINTIFF

 (Name and title or paralegal, legal assistant, or other person who helped prepare this complaint)

 (Signature of attorney, if any)

 (Attorney's address & telephone number)

ADDITIONAL PAGES

All questions must be answered concisely in the proper space on the form. If needed, you may attach additional pages. The form, however, must be completely filled in to the extent applicable.